

## R430-100-8. ADMINISTRATION.

- (1) The licensee is responsible for all aspects of the operation and management of the center.

### Rationale / Explanation

*The license holder may delegate responsibilities under this rule to staff in the child care center. However, ultimate responsibility for compliance with all licensing rules rests with the licensee. The licensee must ensure that he or she has adequate oversight of staff to whom duties have been delegated, in order to ensure that the delegated duties are completed as assigned.*

### Enforcement

*Level 1 Noncompliance: When the rule compliance the licensee fails to demonstrate adequate oversight of is a rule that has been identified as Level 1 Noncompliance. Check with the Bureau Director before citing this rule.*

*Level 2 Noncompliance: When the rule compliance the licensee fails to demonstrate adequate oversight of is a rule that has been identified as Level 2 Noncompliance. Check with the Bureau Director before citing this rule.*

*Level 3 Noncompliance: When the rule compliance the licensee fails to demonstrate adequate oversight of is a rule that has been identified as Level 3 Noncompliance. Check with the Bureau Director before citing this rule.*

- (2) The licensee shall comply with all federal, state, and local laws and rules pertaining to the operation of a child care center.

### Rationale / Explanation

*This rule is intended to address problems which are not already addressed in other child care licensing rules, but which involve the violation of a federal, state, or local law or administrative rule of another agency that applies to the operation of a child care center.*

### Enforcement

*This rule is cited only when there is not another licensing rule that addresses a problem. The noncompliance level depends on the law or rule violated. The Bureau will compare the seriousness of the law or rule violated with the noncompliance levels of the most similar child care licensing rules. Check with the Bureau Director before citing this rule.*

- (3) The provider shall not engage in or allow conduct that is adverse to the public health, morals, welfare, and safety of the children in care.

### Rationale / Explanation

*This rule is intended to address problems which are not already specifically mentioned in other child care licensing rules, but which jeopardize children's well-being.*

### Enforcement

*This rule is cited only when there is not another licensing rule that addresses a problem. The noncompliance level depends on the problem. The Bureau will compare the seriousness of the problem with the noncompliance levels of the most similar child care licensing rules. Check with the Bureau Director before citing this rule.*

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- (4) The provider shall take all reasonable measures to protect the safety of children in care. The licensee shall not engage in activity or allow conduct that unreasonably endangers children in care.

### Rationale / Explanation

*This rule is intended to address problems which may arise that are not specifically mentioned in other child care licensing rules, but which jeopardize children's safety.*

### Enforcement

*This rule is cited only when there is not another licensing rule that addresses a problem. The noncompliance level depends on the problem. The Bureau will compare the seriousness of the problem with the noncompliance levels of the most similar child care licensing rules. Check with the Bureau Director before citing this rule.*

- (5) Either the center director or a designee with written authority to act on behalf of the center director shall be present at the facility whenever the center is open for care.

### Rationale / Explanation

*The purpose of this rule is to ensure that there is always a qualified individual on-site who assumes responsibility for the management of the center and the protection of children's health and safety. Lines of responsibility need to be clearly delineated, including the presence at all times of an individual who is designated to have ultimate responsibility for the functioning of the center. CFOC, pgs. 333-334 Standards 8.001, 8.002*

### Enforcement

*Level 1 Noncompliance: If the facility fails to comply with one or more rules (due to an absent director or designee) that have been identified as Level 1 Noncompliance rules.*

*Level 2 Noncompliance: If the facility fails to comply with one or more rules (due to an absent director or designee) that have been identified as Level 2 Noncompliance rules.*

*Level 3 Noncompliance: If the facility fails to comply with one or more rules (due to an absent director or designee) that have been identified as Level 3 Noncompliance rules, or if no director or designee is present, but no rule violations are observed.*

- (6) Director designees shall be at least 21 years of age, and shall have completed their orientation training.

### Rationale / Explanation

*The director of a center plays a pivotal role in ensuring the day-to-day smooth functioning of the facility within the framework of appropriate child development principles. The well-being of the children in the facility depends largely upon the knowledge, skills, and dependable presence of a director who is able to respond to long-term and immediate needs, and who is able to engage staff in appropriate decision making that affects their day to day practices with children. CFOC, pgs. 11-12 Standard 1.014*

*Completion of orientation training prior to assuming director designee duties helps to ensure the smooth functioning of the center, and is essential in order to protect the health and safety of the children in care. CFOC,*

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pgs. 17-19 Standard 1.023

### **Enforcement**

*Level 2 Noncompliance: If the director designee has not completed his or her orientation training, or is less than 18 years old.*

*Level 3 Noncompliance: If the director designee is at least 18 years old, but not yet 21 years old.*

- (7) The center director shall be on-site at the center for at least 20 hours per week during operating hours in order to fulfill the duties specified in this rule, and to ensure compliance with this rule.**

### **Rationale / Explanation**

*The director of a center plays a pivotal role in ensuring the day-to-day smooth functioning of the facility within the framework of appropriate child development principles. The well-being of the children in the facility depends largely upon the knowledge, skills, and dependable presence of a director who is able to respond to long-term and immediate needs, and who is able to engage staff in appropriate decision making that affects their day to day practices with children. CFOC, pgs. 11-12 Standard 1.014*

### **Enforcement**

*Level 1 Noncompliance: If the director is not on-site at least 20 hours per week, and the facility fails to comply with one or more rules that have been identified as Level 1 Noncompliance rules.*

*Level 2 Noncompliance: If the director is not on-site at least 20 hours per week, and the facility fails to comply with one or more rules that have been identified as Level 2 Noncompliance rules.*

*Level 3 Noncompliance: If the director is not on-site at least 20 hours per week, and the facility fails to comply with one or more rules that have been identified as Level 3 Noncompliance rules. Or, if the director is not present at least 20 hours per week, but no rule violations are observed.*

- (8) The center director must have sufficient freedom from other responsibilities to manage the center and respond to emergencies.**

### **Rationale / Explanation**

*The purpose of this rule is to ensure that the center director is available and has sufficient freedom to perform the many duties that are required in order to supervise caregivers, ensure adequate communication with parents, monitor and correct health and safety hazards, and otherwise maintain compliance with the licensing rules. CFOC, pg. 12 Standard 1.015*

### **Enforcement**

*Center directors may perform a variety of duties in the course of a day, such as substituting for absent staff members, observing or training caregivers in the classroom, conferencing with parents, performing routine maintenance, etc. "Sufficient freedom" means that the center director does not also have permanent duties as a caregiver. However, in small centers with an average daily attendance of 40 children or less, the center director may also have permanent part-time (20 hours per week or less) caregiver duties. In very small centers with an*

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average daily attendance of 30 children or less, the center director may also have permanent full-time caregiver duties.

*Always Level 3 Noncompliance.*

- (9) **There shall be a working telephone at the facility, and the center director shall inform a parent and the Department of any changes to the center's telephone number within 48 hours of the change.**

### Rationale / Explanation

*The purpose of the rule is to ensure that the center can contact the parents of children in care, that the parents of children in care can contact the center, and that the center can always contact emergency personnel (fire, police, ambulance, etc.) if needed. CFOC, pg. 222 Standard 5.084*

### Enforcement

*Level 1 Noncompliance: If there is no working telephone at the facility.*

*Level 3 Noncompliance: If the facility has a working telephone, but does not notify parents or the department of a change in phone number.*

- (10) **The provider shall call the Department within 24 hours to report any fatality, hospitalization, emergency medical response, or injury that requires attention from a health care provider, unless an emergency medical transport was part of a child's medical treatment plan identified by the parent. The provider shall also mail or fax a written report to the Department within five days of the incident.**

### Rationale / Explanation

*The purpose of this rule is so that the Department can work with centers to correct unsafe or unhealthy conditions and to prevent future or additional harm to children. CFOC, pgs. 141-142 Standard 3.089*

### Enforcement

*For the purposes of this rule, emergency medical response means a call to 911 (or the police, ambulance, or fire department, if any of these are called because of an injury to a child).*

*Attention from a health care provider means a visit to a hospital or doctor. Centers must report injuries that require attention from a health care provider as soon as they become aware of the visit to the health care provider (for example, in situations where the parent took the child to a health care provider after leaving the center).*

*Always Level 3 Noncompliance.*

- (11) **The duties and responsibilities of the center director include the following:**  
(a) **appoint, in writing, one or more caregivers to be a director designee, with authority to act on behalf of the center director in his or her absence;**

### Rationale / Explanation

*The director of a center plays a pivotal role in ensuring the day-to-day smooth functioning of the facility within the*

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framework of appropriate child development principles. The well-being of the children in the facility depends largely upon the knowledge, skills, and dependable presence of a director who is able to respond to long-term and immediate needs, and who is able to engage staff in appropriate decision making that affects their day to day practices with children. CFOC, pgs. 11-12 Standard 1.014; pg. 334 Standard 8.002

### **Enforcement**

*Always Level 3 Noncompliance.*

**(11) The duties and responsibilities of the center director include the following:**

**(b) train and supervise staff to:**

- (i) ensure their compliance with this rule;**
- (ii) ensure they meet the needs of the children in care as specified in this rule; and**
- (iii) ensure that children are not subjected to emotional, physical, or sexual abuse while in care.**

### **Rationale / Explanation**

*The purpose of this rule is to ensure that all center staff have the training and ongoing supervision needed to ensure they protect children's health and safety as required in the licensing rules. CFOC, pgs. 17-19 Standard 1.023; pg. 21 Standard 1.025; pgs. 41-42 Standards 1.051, 1.052, 1.054, 1.055, 1.056*

### **Enforcement**

*If staff are trained to report suspected child abuse and neglect to the director, and then either the director or the caregiver reports to CPS or the police, this is acceptable. It is also acceptable if the caregiver discusses the suspected abuse with the director prior to reporting, and the director and caregiver together conclude that it is not abuse. For example, if the director knows about a fall a child had that resulted in an injury, but the caregiver does not know about the fall, and suspects the injury may have resulted from abuse.*

*Level 1 Noncompliance: If caregivers are not adequately trained or supervised to prevent children from being subjected to abuse, or are not adequately trained or supervised to comply with any rule that has been identified as a Level 1 Noncompliance rule, and a child is harmed as a result of this. Check with the Bureau Director before citing.*

*Level 2 Noncompliance: If caregivers are not adequately trained or supervised to comply with any rule that has been identified as a Level 1 or 2 Noncompliance rule, but no child has been harmed as a result of this. Check with the Bureau Director before citing.*

*Level 3 Noncompliance: If caregivers are not adequately trained or supervised to comply with any rule that has been identified as a Level 3 Noncompliance rule, but no child has been harmed as a result of this. Check with the Bureau Director before citing.*

**(12) The provider shall establish and follow written policies and procedures for the health and safety of the children in care. The written policies and procedures shall address at least the following areas:**

- (a) direct supervision and protection of children at all times, including when they are sleeping, using the bathroom, in a mixed group activity, on the playground, and during off-site activities;**
- (b) maintaining required caregiver to child ratios when the center has more than the expected**

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- number of children, or fewer than the scheduled number of caregivers;
- (c) procedures to account for each child's attendance and whereabouts;
- (d) procedures to ensure that the center releases children to authorized individuals only;
- (e) confidentiality and release of information;
- (f) the use of movies and video or computer games, including what industry ratings the center allows;
- (g) recognizing early signs of illness and determining when there is a need for exclusion from the center;
- (h) ensuring that food preparation and diapering handwashing are not done in the same sink in infant and toddler areas;
- (i) discipline of children, including behavioral expectations of children and discipline methods used;
- (j) transportation to and from off-site activities, or to and from home, if the center offers these services; and
- (k) if the program offers transportation to or from school, policies addressing:
  - (i) how long children will be unattended before and after school;
  - (ii) what steps will be taken if children fail to meet the vehicle;
  - (iii) how and when parents will be notified of delays or problems with transportation to and from school; and
  - (iv) the use of size-appropriate safety restraints.

### Rationale / Explanation

*The purpose of this rule is to ensure that centers have written policies in place to protect children's health and safety. An organized, comprehensive approach to ensuring children's health and safety is necessary in child care centers. Such an approach requires written plans, policies, and procedures, and adequate record-keeping so that there is consistency over time and across staff, as well as an understanding between parents and caregivers. This allows clear expectations to be communicated to staff, and helps center directors train and hold staff responsible for following the written policies. CFOC, pgs. 334-336 Standards 8.004, 8.005; pg. 337 Standard 8.008; pg. 338 Standard 8.010; pg. 360*

*A yearly review of the center's written policies encourages administrators to keep this information current. Current information on health and safety practices that is developed cooperatively among caregivers and parents invites better compliance with health and safety procedures. CFOC, pg. 355 Standard 8.040*

### Enforcement

*Level 2 Noncompliance: If the provider does not follow their written policies for (a) - (d) or (g) - (k).*

*Level 3 Noncompliance: If the provider does not have written policies for one or more of the required topics. Or, if the provider does not follow their written policies for (e) or (f).*

- (13) The provider shall ensure that the written policies and procedures are available for review by parents, staff, and the Department during business hours.**

### Rationale / Explanation

*Current information on health and safety practices that is developed cooperatively among caregivers and parents invites better compliance with health and safety procedures. CFOC, pg. 355 Standard 8.040*

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*Access to these written policies by parents and staff is important to ensure that all parties understand the center's policies and expectations, and to help staff remember and follow the policies. Review of the written policies by the Department is used to determine, in part, the center's compliance with the licensing rules. CFOC, pg. 367 Standard 8.057*

### **Enforcement**

*Always Level 3 Noncompliance.*